





WR ID #: 5078419

Application No. CS4-30053(K) C@1

WRIA/COUNTY:

31 Benton

		BENT-11-19
Applicant(s):		Contact(s) /Agent:
Mercer Canyons Inc Attn: Robert Mercer 46 Sonova Road Prosser WA 99350-9312 509.894.4773		Contact(s) /Agent:
PURPOSE OF APPLICATION: Seasonal Change POU 03-01-2012 to 11-30-2012		
Original Water Right Holder: Mercer Ranches Inc: S4-30053(K)P		
ASSIGNED (SEE BACK OF PAGE)		
Date Application received:	December 16, 2011	Initial fee rec'd: Yes X No
Additional fee: \$	Date requested:	Date rec'd:
PUBLICATION:		
Prepared by:	Date:	Date Notice sent:
Date Affidavit rec'd:	Checked by:	Amended Notice: Protest period expires:
WDFW: State	DOH: U	JSBR: TRIBES:
PROTESTS: Date:	By (name):	
Date:	By (name):	
Change ROE written by: HUTTON/OCR Date ROE mailed: 4.19.2012 Trust Water Donation: Extensions:		
DEVELOPMENT SCHEDULE		
Beginning of Construction (BC):	Due date:	
Date sent:		Date rec'd:
Extensions:		
Completion of Construction (CC):	Due date:	
Date sent:		Date rec'd:
Extensions:		
Project Completion (PA):	Due date:	
Date sent:		Date rec'd:
Extensions:		
X Superseding Permit No. S4-30053(K)P Issued: Superseding Certificate No. Issued: Certificate of Change (on Claims) Vol. 1-4, Page Issued: Date Certificate fees requested: Date received:		
REMARKS:		
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ORIGINAL APPLICANT: Mercer Canyons Inc (Robert Mercer) **ASSIGNMENT INFO:** SUBJECT TO REAL ESTATE EXCISE TAX Assignment received: Assignment approved: Submitted to Department of Revenue Assigned To: Date: Address: ___ Phone: Initial: Copy of Application/ROE/Permit sent to assignee Assignment received: Assignment approved: Submitted to Department of Revenue Assigned To: Date: Address: Phone: _ Initial: Copy of Application/ROE/Permit sent to assignee Assignment received: Assignment approved: Submitted to Department of Revenue Assigned To: Date: Address: Phone: __ Initial: Copy of Application/ROE/Permit sent to assignee Assignment received: Assignment approved: Submitted to Department of Revenue Assigned To: Date: Address: Phone: Initial: Copy of Application/ROE/Permit sent to assignee Assignment received: _____ Assignment approved: ____ Submitted to Department of Revenue Assigned To: Date: Address: Phone: Initial: Copy of Application/ROE/Permit sent to assignee Assignment received: _____ Assignment approved: ____ Submitted to Department of Revenue Assigned To: Date: Address: Initial: Phone: _ Copy of Application/ROE/Permit sent to assignee Assignment received: Assignment approved: ____ Submitted to Department of Revenue Assigned To:

Phone: _____ Copy of Application/ROE/Permit sent to assignee

Address:



Date:

Initial: